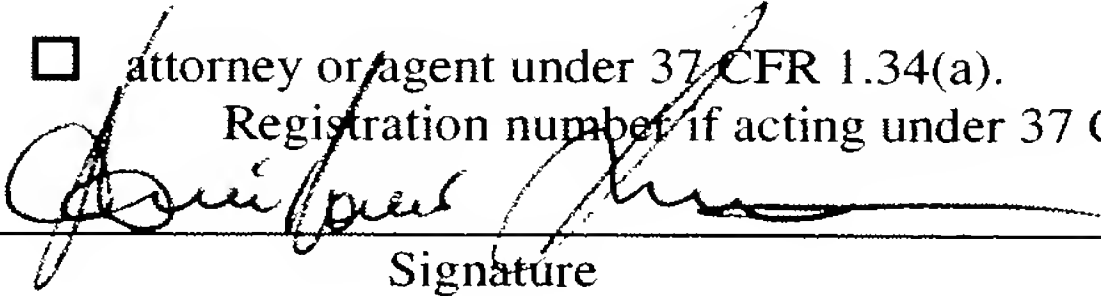


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 59285.000004											
<p style="text-align: center;">CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____.</p> <p>Signature: _____</p> <p>Name: _____</p>		<p>In re Application of Hans Henrik RASKOV et al.</p> <hr/> <p>Application Number 10/552,656 Filed 10-11-2005</p> <p>For METHOD FOR DETECTION OF COLORECTAL CANCER IN HUMAN SAMPLES</p> <hr/> <table style="width: 100%;"> <tr> <td style="width: 50%; padding: 5px;">Group Art Unit: 1645</td> <td style="width: 50%; padding: 5px;">Examiner To Be Assigned</td> </tr> </table>		Group Art Unit: 1645	Examiner To Be Assigned								
Group Art Unit: 1645	Examiner To Be Assigned												
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 80%;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</td> <td style="width: 20%; text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)</td> <td style="text-align: right;">\$ <u>1,020.00</u></td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p style="margin-top: 10px;"><input type="checkbox"/> Applicant claims small entity status.</p> <p><input type="checkbox"/> A check to cover the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-2478</u>. I have enclosed a duplicate copy of this sheet.</p> <p style="margin-top: 10px;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number, if acting under 37 CFR 1.34(a) _____.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p style="text-align: center;"> _____ Signature</p> <p style="text-align: center;">Stanislaus Aksman, Reg. No. 28,562 _____ Typed or printed name</p> </div> <div style="width: 45%;"> <p style="text-align: center;">December 27, 2006 _____ Date</p> <p style="text-align: center;">(703) 677-3003 _____ Telephone Number</p> </div> </div>				<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)	\$ _____	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)	\$ <u>1,020.00</u>	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)	\$ _____
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____												
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<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)	\$ _____												
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)	\$ _____												
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>													
<p><input type="checkbox"/> Total of _____ forms are submitted.</p>													

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